

ANNOTATED BIBLIOGRAPHY

RACIAL TRAUMA

Racial trauma, sometimes called race-based traumatic stress, is the mental and emotional harm caused by personal or vicarious encounters with racial bias, racial discrimination, and systemic racism.¹ A growing body of research examines the effects of racism on the mental and physical health of people of color. The following articles examine the traumatic impact of racism on children and adults. The studies are selected to expand our knowledge of the trauma associated with racism and to educate defenders, researchers, and policymakers who seek to dismantle or reform the systems that exacerbate physical and mental health inequities. The article summaries are drawn from the articles cited.

These articles are cited in reverse chronological order. Please find the most recent articles at the beginning of each section. Please refer to the [Policing as Trauma Annotated Bibliography](https://defendrationaljustice.org), available at <https://defendrationaljustice.org>, for additional studies on the traumatic impact of policing on youth of color.

I. Impact of Racial Trauma on Children & Adolescents

Chad Posick and Akiv Dawson, *The Health Outcomes of Direct and Witnessed Interactions with the Police: Do Race and Ethnicity Matter*, 69 J. Adolesc. Health 183 (2021).

Leah Cave et al., *Racial Discrimination and Child and Adolescent Health in Longitudinal Studies: A Systematic Review*, 250 Social Science & Medicine (2020).

Elisabeth Conradt, Sierra Carter, and Sheila Crowell, *Biological Embedding of Chronic Stress Across Two Generations Within Marginalized Communities*, 14 Child Development Perspectives 4 (2020).

Kenneth R. Ginsburg, *Reaching Teens: Strength-Based, Trauma-Sensitive, Resilience-Building Communication Strategies Rooted in Positive Youth Development*, 2nd Edition: Chapter 42 The Traumatic Impact of Racism and Discrimination on Young People and How to Talk About It, American Academy of Pediatrics (2020).

Devin English et al., *Daily Multidimensional Racial Discrimination Among Black U.S. American Adolescents*, 66 J. Applied Dev. Psychol. (2020).

Brendesha M. Tynes et al., *Race-Related Traumatic Events Online and Mental Health Among Adolescents of Color*, 65 J. Adolescent Health 371 (2019).

¹ For an introduction to racial trauma, please read: Mental Health America, “Racial Trauma,” [www.MHANational.org](https://www.mhanational.org), <https://www.mhanational.org/racial-trauma> (last visited January 25, 2021)

Maria Trent, Danielle G. Dooley, and Jacqueline Dougé, *The Impact of Racism on Child and Adolescent Health*, 144(2) J. Am. Acad. Pediatrics (Policy Statement) (2019).

Adam M. Leventhal et al., *Association of Reported Concern About Increasing Societal Discrimination with Adverse Behavioral Health Outcomes in Late Adolescence*, JAMA Pediatrics (2018).

Aprile D. Benner et al., *Racial/Ethnic Discrimination and Well-being During Adolescence: A Meta-analytic Review*, 73(7) Am. Psychol. 855-883 (2018).

Nia Jeneé Heard-Garris et al., *Transmitting Trauma: A Systematic Review of Vicarious Racism and Child Health*, 199 Soc. Sci. & Med. 230-240 (2018).

Devin English et al., *Adding to the Education Debt: Depressive Symptoms Mediate the Association between Racial Discrimination and Academic Performance in African Americans*, 57 J. Sch. Psychol. 29-40 (2016).

Gene Brody et al., *Discrimination, Racial Identity, and Cytokine Levels Among African-American Adolescents*, 56(5) J. Adolesc. Health, 496–501 (2015).

Adriana J. Umaña-Taylor et al., *Ethnic and Racial Identity During Adolescence and Into Young Adulthood: An Integrated Conceptualization*, 85(1) J. Child Dev. 21-39 (2014).

Naomi Priest et al., *A Systematic Review of Studies Examining the Relationship Between Reported Racism and Health and Wellbeing for Children and Young People*, 95 Soc. Sci. Med. 115-127 (2013).

Vanessa Nyborg et al., *The Impact of Perceived Racism: Psychological Symptoms Among African American Boys*, 32 J. Clinical Child & Adolescent Psychol., 258 (2003).

II. Impact of Racial Trauma on Adults

Monnica T. Williams, Angela Haeny, Samantha C. Holmes, *Posttraumatic Stress Disorder and Racial Trauma*, 32(1) PTSD Research Quarterly of the National Center for PTSD, 1-9 (2021).

Sabrina R. Liu and Sheila Modir, *The Outbreak That Was Always Here: Racial Trauma in the Context of COVID-19 and Implications for Mental Health Providers*, 12(5) American Psychological Association, 439-442 (2020).

Lillian Comas-Diaz et al., *Racial Trauma: Theory, Research, and Healing: Introduction to the Special Issue*, 74(1) American Psychological Association (2019).

Monnica T. Williams et al., *Assessing Racial Trauma with the Trauma Symptoms of Discrimination Scale*, Department of Psychological Sciences, University of Connecticut (2017).

Jennifer A. Coleman, *Racial Differences in Post-Traumatic Stress Disorder in Military Personnel: Intergenerational Transmission of Trauma as a Theoretical Lens*, 25 J. of Aggression, Maltreatment & Trauma 6, 561-579 (2016).

Lillian Polanco-Roman, *Racial Discrimination as Race-Based Trauma, Coping Strategies, and Dissociative Symptoms Among Emerging Adults*, 8(5) Psychological Trauma Theory Research Practice and Policy, 609-617 (2016).

Hector Myers et al., *Cumulative Burden of Lifetime Adversities: Trauma and Mental Health in Low-SES African American and Latino/as*, 7 Psychol. Trauma: Theory, Res., Prac., & Pol'y 243 (2015).

Kevin Nadal et al., *The Impact of Racial Microaggressions on Mental Health: Counseling Implications for Clients of Color*, 92 J. Counseling & Dev. 57 (2014).

Alex Pieterse et al., *Perceived Racism and Mental Health Among Black American Adults: A Meta-Analytic Review*, 59 J. Counseling Psychologist 1 (2012).

III. Clinical and Forensic Evaluation of Racial Trauma

Dylan B. Jackson, *The Case for Conceptualizing Youth-Police Contact as a Racialized Adverse Childhood Experience*, 111 Am. J. Public Health 1189 (2021).

Donte L. Bernard et al., *Making the “C-ACE” for a Culturally-Informed Adverse Childhood Experiences Framework to Understand the Pervasive Mental Health Impact of Racism on Black Youth*, Journal of Child & Adolescent Trauma (2020).

Farzana T. Saleem et al., *Addressing the “Myth” of Racial Trauma: Developmental and Ecological Considerations for Youth of Color*, 23 Clinical Child and Family Psychology Review Volume, 1-14 (2020).

Wendy R. Ellis and William H. Dietz, *A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience Model*, 17 Academic Pediatrics, S86-S93 (2017).

Janet E. Helms et al., *Racism and Ethnoviolence as Trauma: Enhancing Professional and Research Training*, 18 Traumatology 65 (2012).

Maryam M. Jernigan and Jessica Henderson Daniela, *Racial Trauma in the Lives of Black Children and Adolescents: Challenges and Clinical Implications*, 4 Journal of Child & Adolescent Trauma, 123-141 (2011).

Robert T. Carter and Jessica M. Forsyth, *A Guide to the Forensic Assessment of Race-Based Traumatic Stress Reactions*, 37(1) *Journal of the American Academy of Psychiatry and the Law Online*, 28-40 (2009).

Thema Bryant-Davis and Carlota Ocampo, *Racist incident-based trauma*, 33(4) *The Counseling Psychologist*, 479–500 (2005).

I. IMPACT OF RACIAL TRAUMA ON CHILDREN & ADOLESCENTS

Chad Posick and Akiv Dawson, *The Health Outcomes of Direct and Witnessed Interactions with the Police: Do Race and Ethnicity Matter*, 69 J. Adolesc. Health 183 (2021).

- Research indicates that negative and/or unwelcomed police encounters exist as part of the shared cultural memory of Black Americans that is passed down from one generation to the next. This ingrained cultural memory contributes to the cumulative trauma experienced by the community.
- Memories of these negative prior events become cultural forces imbedded with collective meaning. They become metaphorical representations of a “continuation of violence experienced by the whole community.”
- This article discusses how even the most routine police interactions can have profound impacts on an individual and in some cases even lead to “psychological distress, depression, anxiety, and suicidal behavior.”
- Negative health and behavioral outcomes are not limited to direct police encounters but also include indirect encounters, i.e., exposure through media such as the Rodney King beating or the George Floyd murder, or observing a negative encounter involving a family member or friend.
- Research suggests that policies and programs can potentially limit the increasingly negative health consequences that come from police interactions; these include: 1) screening for both bodily and mental health symptoms by professionals who typically come in contact with youth often, 2) Trauma-informed trainings for police officers, 3) Moving away from intrusive police practices.
- NOTE: Please refer to the Policing as Trauma Annotated Bibliography, available at <https://defendracialjustice.org>, for additional studies on the traumatic impact of policing on youth of color.

Leah Cave et al., *Racial Discrimination and Child and Adolescent Health in Longitudinal Studies: A Systematic Review*, 250 *Social Science & Medicine* (2020).

Purpose

- Assessing the existing evidence on the longitudinal relationship between racial discrimination during childhood and adolescence and later physical and mental health outcomes.

Methodology

- Researchers reviewed findings from 46 studies reported in 88 empirical articles published between 2003 and 2017, though about 80 percent were published after 2010. Most studies gathered data over two to three time periods, each exceeding 12 months, on participants ages 11-18 living in the United States.
- Studies used varying criteria to measure impact on physical and mental health, and health-harming behaviors.
 - Physical health: cortisol levels, obesity, injury, asthma, etc.
 - Mental health: anxiety, body image, conduct disorder, depression, emotional difficulties, resilience, etc.
 - Health-harming behaviors: diet, exercise, substance use, sleep difficulties, etc.
 - Behavior problems: anger, delinquent behavior, risk-taking behavior, etc.

Results

- Evidence throughout this review of studies confirms the strong association between child and adolescent exposure to racial discrimination and negative health and wellbeing outcomes.
- Cumulative racial discrimination over time acts on cortisol levels in a way that resembles chronic and traumatic stress.
- Researchers measured cortisol levels in participants who were approximately 32 years of age and found that those who experienced racial discrimination during adolescence had variations in their cortisol levels similar to those found in people who experienced chronic and traumatic stress.
- Vicarious racism via the primary caregiver is associated with sleep difficulties and asthma.
- Associations between racial discrimination and mental health outcomes are even stronger and more consistent than those seen for physical health outcomes in longitudinal studies.
- Behavior issues, such as conduct disorder, aggression and risk-taking, and health-harming behaviors, such as substance use, were also found to have strong and consistent longitudinal associations with racial discrimination.
- Earlier exposure to racism may lead to greater vulnerability to negative physical and mental health outcomes. Children exposed to racial discrimination at 5-10 years of age reported higher proportions of significant adverse effects on behavior problems and health harming behaviors compared to exposure at 11 to 18 years of age.

Elisabeth Conradt, Sierra Carter, and Sheila Crowell, *Biological Embedding of Chronic Stress Across Two Generations Within Marginalized Communities*, 14 Child Development Perspectives 4 (2020).

- Chronic stress caused by racial trauma, systemic racism, and historical trauma can affect the long-term health outcomes, including potentially mental health outcomes, for both pregnant women and their children.

- Pregnant women from marginalized communities are disproportionately more likely to experience chronic stress in the form of discrimination, historical trauma, and other types of racism. This article seeks to understand the biological mechanisms underlying racism, discrimination, and historical traumas affect the health of two generations: the pregnant woman and her child.
- The mother's heightened cortisol level, common in chronic stress, may affect the fetal neuroendocrine system, including the hypothalamic, pituitary, and adrenal systems. This prenatal exposure to chronic stress can lead to a compromised immune system. Prenatal exposure to racial discrimination is related to higher levels of circulating cortisol in pregnant women.
- Exposure to chronic racism and discrimination may induce increased cellular aging in pregnant women, causing racial health disparities at birth.
- The authors also theorize that epigenetics (the science of how our environments or experiences can change the way our genes are "expressed" or "read") could be a pathway that the harmful effects of chronic stress are passed from mother to child.
- The authors call for more research on the impact of racial trauma, including historical trauma, on pregnant women and their children.

Kenneth R. Ginsburg, *Reaching Teens: Strength-Based, Trauma-Sensitive, Resilience-Building Communication Strategies Rooted in Positive Youth Development*, 2nd Edition: Chapter 42 The Traumatic Impact of Racism and Discrimination on Young People and How to Talk About It, American Academy of Pediatrics (2020).

- This book chapter describes the negative effects of racism on youth development, as well as on their health and well-being, and the toll it takes on families and communities who have been racially marginalized.
- It also invites readers to place themselves in the shoes of others to help them recognize their own habits of harm, find strength, discover ways to heal, and develop a deeper understanding of what it means to care for one another.
- Key concepts about teen development and racism:
 - Adverse childhood experiences are broader than initially measured;
 - Racism undermines development and well-being: racism is an expanded ACE (Adverse Childhood Experiences) and a social determinant of health;
 - There are intergenerational impacts of the traumas associated with discrimination;
 - Today's youth live in an increasingly diverse society—these demographic shifts present an urgent need to address discrimination and bias;
 - Acts of intolerance are on the rise;
 - Effectively addressing discrimination requires intersectional approaches.

Devin English et al., *Daily Multidimensional Racial Discrimination Among Black U.S. American Adolescents*, 66 J. Applied Dev. Psychol. (2020).

Purpose

- This study examines the psychological effects of daily racial discrimination experienced individually, vicariously, online, offline, and through teasing.

Methodology

- Participants were 101 students between the ages of 13 and 17 years old in Washington, D.C. Eighty-eight percent of participants identified as African American or Black, 1% identified as African, 1% identified as Afro-Latino, 2% identified as biracial/multiracial, and 8% identified as “other.”
- The study measured daily racial discrimination and 14-day depressive symptoms slopes.

Results

- Participants reported 5606 experiences of racial discrimination during the study and averaged 5.21 experiences per day across the six subscales.
 - The two online subscales were more frequent than the offline subscales.
 - Aside from online vicarious experiences, all subscales were positively associated with depressive symptoms slopes.
 - These results provide empirical support for the frequency of daily microaggressions and underscore the importance of assessing online, vicarious, and teasing experiences along with the more commonly measured individual and general forms of racial discrimination.
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Brendesha M. Tynes et al., *Race-Related Traumatic Events Online and Mental Health Among Adolescents of Color*, 65 J. Adolescent Health 371 (2019).

Purpose

- This study assesses whether viewing race-related traumatic events online (TEO) was associated with depressive and post-traumatic stress disorder (PTSD) symptoms.

Methodology

- The national sample included 302 African American and Latinx adolescents between 11–19 years old.
- The TEOs included: seeing images or videos of others from their ethnic group being beaten, arrested or detained, and a viral video of a Black person being shot by a police officer.

Results

- There is a significant association between TEO and both PTSD symptoms and depressive symptoms.
 - Participants reported depressive symptoms such as “being sad,” “feeling like crying,” “feeling alone,” and “feeling like they had friends.”
 - PTSD symptoms included re-experiencing, hyperarousal, and numbing.
 - Viewing each type of TEO was associated with reporting PTSD symptoms. Additionally, more frequently viewing TEOs was associated with higher levels of depressive symptoms and PTSD symptoms.
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Maria Trent, Danielle G. Dooley, and Jacqueline Dougé, *The Impact of Racism on Child and Adolescent Health*, 144(2) J. Am. Acad. Pediatrics (Policy Statement) (2019).

- This policy statement is an evidence-based document that focuses on the role of racism in child and adolescent development and health outcomes.
- It highlights the continued negative impact of racism on health and well-being through implicit and explicit biases, institutional structures, and interpersonal relationships.
- It encourages pediatricians to implement recommendations in practice that will better address the factors that make some children more vulnerable than others.

Adam M. Leventhal et al., *Association of Reported Concern About Increasing Societal Discrimination with Adverse Behavioral Health Outcomes in Late Adolescence*, JAMA Pediatrics (2018).

Purpose

- This study examines whether racial discrimination in society is associated with behavioral health outcomes among adolescents.

Methodology

- The researchers collected data from January 2 through September 28, 2016 and during a follow-up from January 1 through August 10, 2017 at ten high schools in Los Angeles. In the self-report survey of 2572 adolescents, the participants express their concern about the increasing hostility and discrimination of people because of their race, on a scale from “not at all” concerned to “extremely” concerned. They also answered questions related to their use of different substances.

Results

- Self-reported level of concern about increasing societal discrimination was associated with higher frequency of substance use, a greater number of substances used, 11% higher odds of depression, and 12% greater odds of attention-deficit/hyperactivity disorder symptoms.

Aprile D. Benner et al., *Racial/Ethnic Discrimination and Well-being During Adolescence: A Meta-analytic Review*, 73(7) Am. Psychol. 855-883 (2018).

Purpose

- This study investigates the relationship between perceived racial/ethnic discrimination and socioemotional distress, academics, and risky health behaviors during adolescence. It highlights the pernicious effects of racial/ethnic discrimination for adolescents across developmental domains and suggests who is potentially at greater risk.

Methodology

- The study included a meta-analysis of 214 peer-reviewed articles, theses, and dissertations. Researchers measured 11 separate indicators of well-being, including depressive symptoms, psychological distress, self-esteem, academic achievement and engagement, sexual behaviors, and substance abuse.

Results

- Greater perceptions of racial/ethnic discrimination were linked to more depressive and internalizing symptoms; greater psychological distress; poorer self-esteem; lower academic achievement and engagement; less academic motivation; greater engagement in externalizing behaviors, risky sexual behaviors, and substance use; and more associations with deviant peers.

Nia Jeneé Heard-Garris et al., *Transmitting Trauma: A Systematic Review of Vicarious Racism and Child Health*, 199 Soc. Sci. & Med. 230-240 (2018).

- This article examines the literature on children's direct exposure to racism, reviewing research methodology, including conceptualization and measurement of vicarious exposure, sample characteristics, significant associations with child health outcomes, and mediators and/or moderators of those associations.
 - This review aims to extend the literature on vicarious racism and child health, aiming to understand how vicarious racism transmits trauma to children.
- Researchers performed a systematic review and screened 1371 articles drawn from 7 databases, with 30 studies meeting inclusion criteria.
- The findings are organized in a schematic diagram illustrating indirectly experienced racism and child health outcomes to identify current gaps in the literature and ways in which to bridge those gaps.

Devin English et al., *Adding to the Education Debt: Depressive Symptoms Mediate the Association between Racial Discrimination and Academic Performance in African Americans*, 57 J. Sch. Psychol. 29-40 (2016).

Purpose

- This study examines whether racial discrimination predicted the academic performance of African American students through its effect on depressive symptoms.
- In order to reduce the achievement gap between white and African American students and pay off the mounting education debt, the issue of experienced racial discrimination must be addressed in schools. Legislators, school administrators, and school staff must be willing to address racial discrimination as a real and meaningful stressor affecting their students.

Methodology

- Participants were a community sample of 7th to 9th grade African American adolescents attending urban public schools.

Results

- Experiencing racial discrimination predicted increases in depressive symptoms 1 year later for African American adolescents, which, in turn, predicted decreases in academic performance the following year.
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Gene Brody et al., *Discrimination, Racial Identity, and Cytokine Levels Among African-American Adolescents*, 56(5) J. Adolesc. Health, 496–501 (2015).

Purpose

- Psychosocial stressors that disproportionately affect African Americans have been proposed as a mechanism that increases their vulnerability to cardiometabolic risk and poor health.
- The study determines whether (a) reported racial discrimination from ages 17 to 19 forecast heightened cytokine levels at age 22, and (b) whether this association is lower for youths with positive racial identities.

Methodology

- A community sample of 160 African Americans who were 17 at the beginning of the study were used.
- Discrimination and racial identity were measured with questionnaires, and blood was drawn to measure basal cytokine levels.

Results

- Youth exposed to high levels of racial discrimination exhibited elevated cytokine levels 3 years later. This association was not significant for young adults with positive racial identities.
 - Perceived racial discrimination forecast higher cytokine levels.
 - Positive racial identity forecast lower cytokine levels.
 - The association between perceived discrimination and cytokine levels was lower among adolescents with a positive racial identity.
- High levels of interpersonal racial discrimination and the development of a positive racial identity operate jointly to determine low-grade inflammation levels that have been found to forecast chronic diseases of aging, such as coronary disease and stroke.

Adriana J. Umaña-Taylor et al., *Ethnic and Racial Identity During Adolescence and Into Young Adulthood: An Integrated Conceptualization*, 85(1) J. Child Dev. 21-39 (2014).

- This article provides a narrative review of the existing literature on how racial and ethnic identity (REI) are associated with psychological, academic, and health outcomes among ethnic minority adolescents.
 - The review of the empirical literature suggests that diverse aspects of ERI were generally associated with positive psychosocial functioning and mental health outcomes among minority adolescents.
 - Several aspects of ERI, particularly positive feelings about one's ethnic or racial group (e.g., affirmation, private regard), are consistently associated with positive psychosocial adjustment among African American and Latino youth, and with academic outcomes among African American, Latino, and Asian American and Pacific Islander youth to some extent.
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Naomi Priest et al., *A Systematic Review of Studies Examining the Relationship Between Reported Racism and Health and Wellbeing for Children and Young People*, 95 Soc. Sci. Med. 115-127 (2013).

Purpose

- This article provides a systematic review of studies that examine relationships between reported racial discrimination and child and youth health.

Methodology

- It explores 121 studies identified by a comprehensive search strategy, including definitions and measurements of racial discrimination and the nature of reported associations.

Results

- Among the 121 studies, mental health outcomes (e.g. depression, anxiety) were most commonly reported, with statistically significant associations with racial discrimination found in 76% of outcomes examined.
 - Statistically significant associations were also found for over 50% of associations between racial discrimination and positive mental health (e.g. self-esteem, resilience), behavior problems, wellbeing, and pregnancy/birth outcomes.
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Vanessa Nyborg et al., *The Impact of Perceived Racism: Psychological Symptoms Among African American Boys*, 32 J. Clinical Child & Adolescent Psychol., 258 (2003).

Purpose

- To determine the psychological impact of experiences of racism on African American boys,

Methodology

- Participants were 84 African American boys ages 10 to 15 and their primary caregivers.
- Researchers used assessment instruments, youth self-report survey, and a separate survey with the child's primary caregiver to gather data on mental health symptoms, behaviors, and experiences with racism.

Results

- Higher levels of personal experiences with racism were associated with higher levels of externalizing behavior problems, such as aggression or attention problems, and internalizing behaviors, such as symptoms of anxiety and depression or withdrawal.
- Boys reporting more personal experiences of racism had higher levels of hopelessness and poorer self-images.
- Researchers also posited that having more same-race peers in school acts as a buffer against personal experiences with racism, as participants who went to schools with higher percentages of African American students showed less of a connection between personal experiences of racism and poor self-image.
- "The results of this study suggest that the experience of racism is a real phenomenon for African American boys and is correlated with measures of their psychological well-being."

II. IMPACT OF RACIAL TRAUMA ON ADULTS

Monnica T. Williams, Angela Haeny, Samantha C. Holmes, *Posttraumatic Stress Disorder and Racial Trauma*, 32(1) PTSD Research Quarterly of the National Center for PTSD, 1-9 (2021).

- This literature review discusses research on the robust connection between racial discrimination and PTSD symptoms.
- Traumatization may occur at both individual and community levels, noting studies that found PTSD symptoms after individual experiences of racial discrimination and community-wide mental health impact after highly-publicized instances of police killings.
- Culturally-informed assessment and treatment are vital to recovery from racial trauma.

Sabrina R. Liu and Sheila Modir, *The Outbreak That Was Always Here: Racial Trauma in the Context of COVID-19 and Implications for Mental Health Providers*, 12(5) American Psychological Association, 439-442.

- This article provides insight on how the COVID-19 pandemic has racially traumatized minority communities, specifically Asian, Black, and Latinx communities on an individual, cultural, and structural level. As cases of COVID-19 continue to grow, so do racism and oppression.
- An example of individual-level racism is concerns prompted in the Black community that complying with a mask mandate would increase racial profiling, and indeed, in March 2020, two Black men were followed around their local Walmart and subsequently asked to leave by a police officer because they were wearing surgical masks.
- Structural racism in the COVID-19 era translates to a lack of access to protective resources and care, such as many primarily Black and Latinx communities lacking well-resourced hospitals, available testing, and housing that allows for safe social distancing and quarantining. The incarcerated are especially vulnerable, and Black and Latinx people make up 56% of the U.S. incarcerated population and only 32% of the total population.
- The authors suggest increasing one's cultural competency, utilizing racial socializations, and taking a trauma and culturally-informed approach to one's work as a way to mitigate against the harmful effects of racial trauma.

Lillian Comas-Diaz et al., *Racial Trauma: Theory, Research, and Healing: Introduction to the Special Issue*, 74(1) American Psychological Association (2019).

- This article provides an overview of racial trauma, which “refers to People of Color and Indigenous individuals' (POCI) reactions to dangerous events and real or perceived experiences of racial discrimination.”

- The article introduces additional research on the topic, including articles on Indigenous populations and Japanese Americans, which discuss intergenerational or historical trauma, and African Americans, Latinx immigrants, and Americans of Middle Eastern and North African descent.
- The authors review different ways to mitigate the damaging effects of racial trauma through healing models, including development of racial socialization for positive development of African American youth, methodologically sound research, and the inclusion of pragmatic public policy interventions.

Nicholas Sibrava et al., *Posttraumatic Stress Disorder in African American and Latinx Adults: Clinical Course and the Role of Racial and Ethnic Discrimination*, 74 Am. Psychologist 101 (2019).

Purpose

- This study examined the connection between experiences of racial discrimination and PTSD.

Methodology

- Participants were 134 Latinx and 166 African American adults, diagnosed with 1 or more anxiety disorder, including 93 African Americans and 61 Latinx participants who were diagnosed with PTSD.
- Researchers followed participants over a five-year period and used in-person and telephone interviews to gather information, including data on participants “perceived discrimination” defined as “the perception or belief that one has been treated in a negative, aggressive or unfair way by institutions and individuals, primarily as function of personal characteristics including race, ethnicity skin color, gender, or other demographic factors.”

Results

- The reported frequency of experiences with discrimination significantly predicted diagnosis of PTSD.
 - The 5-year remission rates revealed that the vast majority of study participants with PTSD “remained chronically ill,” even though almost all received treatment at some point.
 - While the researchers did not make definitive claims about causality, they did note that their finding “nonetheless suggests that discrimination experiences may be a possible risk factor for the development of PTSD” and that “for some African American and Latinx individuals, experiences with discrimination may be traumatic in and of themselves.”
 - The researchers also highlighted the “high frequency of discrimination experiences [in study participants], potentially amounting to continual reexposure and retraumatization.” The most frequently reported experiences with discrimination in the African American PTSD sample were seeing same-race friends treated unfairly due to race, personally being treated unfairly due to race, and being threatened or harassed at least once a week. The most frequently reported experiences for the Latinx sample were being disliked because of race/ethnicity, being treated unfairly due to race/ethnicity, and receiving poorer service than others in restaurants and stores.
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Monnica T. Williams et al., *Assessing Racial Trauma with the Trauma Symptoms of Discrimination Scale*, Department of Psychological Sciences, University of Connecticut (2017).

Purpose

- This study assesses the Trauma Symptoms of Discrimination Scale (TSDS), a method of measuring discriminatory distress with a focus on anxiety-related trauma symptoms.

Methodology

- Researchers had a group of African American monoracial and biracial undergraduate students complete questionnaires, including TSDS, the Multigroup Ethnic Identity Measure, assessments of racial discrimination, and a range of psychopathology measures to 1) determine the TSDS factor structure, 2) determine the Pearson's correlations between the TSDS and measures of discrimination and psychopathology, and 3) use linear regression to predict the TSDS from frequency of discrimination.

Results

- Inspection of item loadings suggested that the four components represented include (a) uncontrollable distress and hyperarousal, (b) alienation from others, (c) worry about safety and the future, and being (d) keyed up and on guard
- All measures of discrimination predicted symptoms of trauma, even when accounting for prior traumatic experiences.
- All forms of discrimination add to the traumatization of African Americans.

Jennifer A. Coleman, *Racial Differences in Post-Traumatic Stress Disorder in Military Personnel: Intergenerational Transmission of Trauma as a Theoretical Lens*, 25 J. of Aggression, Maltreatment & Trauma 6, 561-579 (2016).

- Psychologist Jennifer Coleman theorizes that intergenerational trauma may be the cause of higher rates of PTSD in African American military personnel. Intergenerational racial trauma could be transferred through learned behaviors (e.g., aggression or violence) or clinical symptoms from caregivers (e.g., hypervigilance), learned cognitive schemas (e.g., the world is a dangerous place), disruption in attachment to primary caregivers, or from changes in biology caused by trauma (such as epigenetic changes).
- Coleman emphasizes that it is likely that current-day systemic racism as well as interpersonal racial discrimination render African American military personnel more vulnerable to PTSD. She calls for more research in this area.
- The Diagnostic and Statistical Manual of Mental Disorders (5th ed.) criteria for PTSD do not take into account the effects of intergenerational trauma, discrimination, or racism. Coleman posits that African American military personnel with PTSD may be better understood through a more culturally inclusive framework (e.g. complex trauma, race-based traumatic stress), because the stressors they experience due to racism may exacerbate or lead to symptoms of PTSD.

Lillian Polanco-Roman, *Racial Discrimination as Race-Based Trauma, Coping Strategies, and Dissociative Symptoms Among Emerging Adults*, 8(5) Psychological Trauma Theory Research Practice and Policy, 609-617 (2016).

Purpose

- This study analyzes the correlation between racial discrimination and dissociation, a product of traumatic experiences.

Methodology

- In a study of 743 adults between ages 18-29 comprised of a diverse representation of racial/ethnic minority, immigrant, commuter, and working class students from a large, urban public university located in Northeastern, U.S., researchers had participants complete a variety of self-report measures on racial discrimination, responses to racial discrimination, traumatic life events, and dissociative symptoms, such as distortions in perception of the self, events, and sensory information (e.g., “My body felt strange or unreal,” or “I saw something that seemed real, but was not.”), intrusions of trauma-related experiences (e.g. “I had moments when I lost control and acted like I was back in an upsetting time in my past.”), and gaps in memory and awareness (e.g. “I suddenly realized that I hadn’t been paying attention to what was going on around me.”).

Results

- There is a positive correlation between racial discrimination and dissociative symptoms, even when adjusted for demographics and other traumatic life events.
- In contrast, there is a negative correlation between active coping strategies in response to racial discrimination and dissociative symptoms.
- When racial and ethnic minority adults, ages 18-29, experience racial discrimination, they are more likely to be affected by dissociative symptoms. However, different coping strategies may mitigate the existence of these dissociative symptoms.

Hector Myers et al., *Cumulative Burden of Lifetime Adversities: Trauma and Mental Health in Low-SES African American and Latino/as*, 7 Psychol. Trauma: Theory, Res., Prac., & Pol’y 243 (2015).

Purpose

- This study examined whether adversities and trauma experienced over time predict the severity of symptoms of depression, anxiety, and posttraumatic stress disorder.

Methodology

- Participants were 500 low-socioeconomic status African American and Latino men and women with histories of adversities and trauma.
- Experiences of discrimination due to race/ethnicity were assessed using a survey, including questions such as “Because of your race... how often have policemen or security officers been unfair to you? [or] have people not trusted you.”
- Questionnaires were used to gather data on frequency of other traumas and adversities from childhood to present day.

Results

- Researchers found that experiences of discrimination, childhood family adversities, childhood sexual abuse, other childhood trauma, and chronic stresses combined predicted poorer mental health status.
- Participants reported high levels of experiences of discrimination due to ethnicity. “This study supports that experiences of discrimination and other stressors [...] characterizing histories of adversities and traumas significantly predicts psychological distress and dysfunction. This occurred even though many of these adults had lower than expected symptoms of psychological distress, especially general anxiety and PTSD.”

Kevin Nadal et al., *The Impact of Racial Microaggressions on Mental Health: Counseling Implications for Clients of Color*, 92 J. Counseling & Dev. 57 (2014).

Purpose

- To examine the effect racial microaggressions can have on people of color and the implications for mental health counselors

Methodology

- There were 506 participants in the study, including 375 women and 131 men, 31% were Asian American/Pacific Islander, 25.9% were Latina/os, 15.8% were Blacks/African Americans, 12.5% were whites/European Americans, 9.5% were multiracial.
- Participants completed a 45-item self-report survey on racial and ethnic microaggressions experienced over the last 6 months and a mental health survey.

Results

- Black, Asian, Latina/o, and multiracial people experienced similar amounts of cumulative microaggressions, while white participants experienced significantly fewer. The types of microaggressions varied between races with Black participants experiencing more criminality-related microaggressions.
- “Individuals who perceive and experience racial microaggressions in their lives are likely to exhibit negative mental health symptoms, such as depression, anxiety, negative affect (or negative view of the world), and lack of behavioral control.”
- Higher cumulative microaggressions may predict more mental health problems.
- Researchers’ findings also led them to believe that particular types of microaggressions may be correlated with negative mental health symptoms, including being treated like a second-class citizen, being invalidated or exoticized, or assumed to be similar to others in their group.

Alex Pieterse et al., *Perceived Racism and Mental Health Among Black American Adults: A Meta-Analytic Review*, 59 J. Counseling Psychologist 1 (2012).

Purpose

- To understand the impact experiences of racism can have on the mental health of Black American adults

Methodology

- Researchers conducted a meta-analysis of 66 studies (total sample size of 18,140 across studies) published between January 1996 and April 2011 on the associations between racism and mental health among Black Americans.
- This meta-analysis focused on Black Americans, noting that this is “a population that has reported on average more incidents of racism than other racial minority groups and for which racism has resulted in a range of health disparities.”

Results

- “Findings suggest that the mental health of Black Americans is negatively impacted by exposure to racism. More specifically, the greater the exposure to and appraised stressfulness of racist events, the greater the likelihood of reporting mental distress.”
 - Researchers highlighted that their “findings lend support to theorists who are calling for experiences of racism to be considered within the context of trauma,” and “among Black Americans, negative psychological responses to racism carry many features associated with trauma.”
 - The meta-analysis also found a robust relationship between perceived racism and self-reported depression and anxiety.
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III. CLINICAL & FORENSIC EVALUATION OF RACIAL TRAUMA

NOTE: As we continue our research, we are adding additional articles on evaluating and assessing racial trauma. We plan to consult with an expert in the field. In the meantime, we include the articles below for your consideration.

Dylan B. Jackson, *The Case for Conceptualizing Youth-Police Contact as a Racialized Adverse Childhood Experience*, 111 Am. J. Public Health 1189 (2021).

- This editorial article connects a study by Amanda Geller (*Youth-Police Contact: Burdens and Inequities in an Adverse Childhood Experience, 2014-2017*, 111 Am. J. Public Health 1300 (2021), summarized in the [Policing as Trauma Annotated Bibliography](#)) to additional research on the traumatic impact of policing on youth of color, arguing that curtailing the hyper-surveillance of Black youth and bolstering community infrastructure (such as community centers, after-school and youth empowerment programs) are urgent public health necessities.
- Encounters with police are traumatic for Black youth and are internalized by youth as “extremely frightening, harmful, or threatening” and can potentially cause adverse physiological symptoms.
- Police-induced trauma is, in many respects, its own class of trauma; it is set apart as a uniquely potent historical, racialized, intergenerational form of trauma that is affixed to a collective experience of marginalization.
- Better assessment tools, such as a culturally informed adverse childhood experiences (C-ACE) framework, are needed to identify and respond to the traumatic impact of policing in the lives of Black youth.

- Additional research must be done to identify the policy and programmatic solutions to mitigate the trauma of racialized police encounters, including equipping teachers to facilitate non-stigmatizing, culturally competent conversations about these experiences in ways that provide support and prevent re-traumatization.

Donte L. Bernard et al., *Making the “C-ACE” for a Culturally-Informed Adverse Childhood Experiences Framework to Understand the Pervasive Mental Health Impact of Racism on Black Youth*, Journal of Child & Adolescent Trauma (2020).

- This article proposes a new framework for understanding Adverse Childhood Experiences (ACEs), as the current framework inconsistently evaluates certain experiences and is difficult to assess “in a reliable and uniform manner.” Upon direct or indirect exposure to ACEs, youth may experience disruptions in neurodevelopment, which can subsequently impair social, emotional, and cognitive functioning. These impairments are shown to heighten risk for poor mental and physical health outcomes.
- While the current ACEs model includes “historical trauma” at the base of the ACE pyramid, and ample research shows that a parent’s own ACEs heighten the risk their child will experience ACEs, it does not include racial discrimination at the individual or systemic levels, or adequately assess historical racial trauma.
- Taking into consideration the history and current prevalence of Black youth’s exposure to racial trauma, the authors propose a culturally informed ACEs model, or “C-ACE”, to understand the impact of racism on Black youth through a holistic approach. In addition to assessing personal experiences of racial discrimination, the proposed model recognizes the historical and intergenerational effects of racism.

Farzana T. Saleem et al., *Addressing the “Myth” of Racial Trauma: Developmental and Ecological Considerations for Youth of Color*, 23 Clinical Child and Family Psychology Review Volume, 1-14 (2020).

- This article proposes a new way of understanding the effects of racial stress and trauma (RST) on youth of color, specifically during three pivotal developmental periods: pre-school/elementary, middle school, and high school.
- Through an ecological approach, which provides a framework for how RST can impact family and community systems the child is embedded within, and the use of case studies, the authors analyze how RST affects youth of color and their communities.
- The authors then propose the Developmental and Ecological Model of Youth Racial Trauma (DEMYth-RT) to illuminate how racial stressors influence trauma symptoms and coping mechanism in youth of color. The researchers conclude with clinical research recommendations for the field.

Wendy R. Ellis and William H. Dietz, *A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience Model*, 17 Academic Pediatrics, S86-S93 (2017).

- The Building Community Resilience Model is a transformative approach to collaboration across child health, public health, and community-based agencies to address the root causes of toxic stress and childhood adversity and to build community resilience.
- The article notes that 50% of all American Children have experienced at least 1 ACE, with children of color at highest risk. Compounding their risk of exposure to ACEs, African American, American Indian, and Hispanic children are also more likely to live in high-poverty areas (30%, 28%, and 23% respectively)
- Racism and systemic injustice contribute to the toxic stress experienced by children of color.
- The authors created the Developing Community Resilience Pair of ACEs tree image to illuminate the relationship between adverse childhood experiences and adverse community environments.
- The study advocates for the creation of strategically coordinated supports and services, joining with parents, families, and community partners, so child health systems can play a critical role in improving the long-term health and well-being of the communities they serve
- The authors define community resilience as the capacity to anticipate risk, limit effects, and recover rapidly through survival, adaptability, evolution, and growth in the face of turbulent change and stress

Janet E. Helms et al., *Racism and Ethnoviolence as Trauma: Enhancing Professional and Research Training*, 18 *Traumatology* 65 (2012).

- This article reviews the growing body of research advocating that racism and ethnoviolence (including vicarious experiences and exposure to microaggressions) should be recognized as traumas. Most researchers define trauma as “an event or events that involved actual or threatened death or serious injury or a threat to the physical integrity of self or others.” Experiences of racism that do not fit in this commonly accepted definition should still be considered trauma when they cause related symptoms as they may trigger memories of past personal or historical group trauma that are recalled as threatening to one’s life or mental health.
- Current PTSD assessment instruments don’t appropriately assess these stress reactions to racism.
- The authors recommend researchers and practitioners conduct culturally responsive and racially informed assessments and interventions with African Americans, Latina/Latino Americans, Asian Pacific Islander Americans, Native Americans, and related immigrant groups when they present with symptoms of trauma, particularly when their trauma responses are atypical or the traumatic event is unknown.

Maryam M. Jernigan and Jessica Henderson Daniela, *Racial Trauma in the Lives of Black Children and Adolescents: Challenges and Clinical Implications*, 4 *Journal of Child & Adolescent Trauma*, 123-141 (2011).

- This article examines the experiences of Black youth relating to racism and racial discrimination. Through the use of case studies and relevant data, the authors examine the prevalence of Black youth's exposure to racial trauma. Schools are noted as a consistent source of individual and systemic experiences of racism for Black youth.
- Citing current definitions of trauma in the DSM-IV-TR as lacking a conceptualization of racial incidents as traumatic, the authors lament the lack of proper diagnosis and treatment for young people suffering the traumatic impacts of racism. The authors highlight experiences, such as microaggressions, microassaults, microinsults, etc., and argue for developmentally appropriate assessment and treatment of racial trauma.
- NOTE: This study was published in 2011. Please consider how research has progressed

Robert T. Carter and Jessica M. Forsyth, *A Guide to the Forensic Assessment of Race-Based Traumatic Stress Reactions*, 37(1) *Journal of the American Academy of Psychiatry and the Law Online*, 28-40 (2009).

- The authors provide psychiatrists and other mental health professionals with guidance in using the appropriate empirical and clinical resources and training for developing effective expert reports in race-based legal claims. Although race-based traumatic stress reactions will share some symptoms of DSM diagnoses (e.g. PTSD), they may not meet the diagnostic criteria. The authors encourage valuers to make a distinction between a formal diagnosis and the still damaging symptoms caused by an experience of racial discrimination.
- Using an analysis of a case study, they explain and add on to the previous work on the psychiatric and emotional impact of race-based confrontations on minority groups. They assert that experiences of race-based traumatic stress from discrimination and harassment of various types (e.g. housing, employment, service provisions, interpersonal assaults, and racial profiling) are often involved in the development of poor physical and mental health, and should be included in assessments by clinicians and mental health experts.

Thema Bryant-Davis and Carlota Ocampo, *Racist incident-based trauma*, 33(4) *The Counseling Psychologist*, 479–500 (2005).

- This article provides an overview on how racism has a traumatic effect on marginalized communities. The authors propose several considerations for researchers and counselors to consider when analyzing the impact of racism as well as the impacts of ambiguous or covert racist acts. The authors conclude with how characterizing racial trauma impacts the current field and the benefits of expanding the current DSM-IV model, to include a new definition of trauma.
- Thema Bryant-Davis and Carlota Ocampo are leaders in racial trauma research.